

07-16-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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| FILING INVEN ASSIGN GROUP EXAMI ATTOR | ATENT APPLICATION SERIAL NO. B DATE TORS NEE P ART UNIT INER RNEY'S DOCKET NO. | Gaylon S. Campbell and Warren C. Greenway Decagon Devices, Inc. Unknown Unknown 8050 | | | | | | |
| TRANSMITTAL LETTER AND CERTIFICATE OF MAILING | | | | | | | | |
| To: | Box Patent Application From: Assistant Commissioner for Patents Washington, D.C. 20231 | L. Grant Foster FOSTER & FOSTER L.L.C. 602 East 300 South Salt Lake City, UT 84102 Telephone: (801) 364-5633 Facsimile: (801) 355-8938 | | | | | | |
| Enclosed are the items listed below submitted regarding the matter identified above: | | | | | | | | |
| Transmittal Letter with Certificate of Mailing included PTO Return Postcard Receipt Patent Application (13 pages, including Specification, 8Claims, Abstract and 4 sheets of drawings (Figs. 1-5)) Declaration of Joint Inventors for Patent Application Verified Statement Claiming Small Entity Status Assignment (with Recordation Form Cover Sheet) Fee Calculation Sheet Check for \$395.00 (\$355.00 patent application filing fee; \$40.00 Assignment recordation fee) | | | | | | | | |
| Deposit Account Authorization - The Commissioner is hereby authorized to charge payment of any applicable fees to Deposit Account No. 06-1620. Date: 12 July 2001 By: L. Grant Foster Reg. No. 33,236 | | | | | | | | |
| <u>CERTIFICATE OF MAILING</u> | | | | | | | | |
| I hereby certify the items listed above as enclosed are being deposited with the U.S. Postal Service as either first class mail or Express Mail, if the blank for Express Mail No. is completed below, in an envelope addressed to Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231, on the below indicated date. Any Express Mail No. has also been marked on the listed items. | | | | | | | | |
| Express Mail No. EL811844659US | | | | | | | | |
| Date: | | Kuthy Cut | | | | | | |

| FEE TYPES | | | | | | | | |
|--|---|----------------------|-------------------|--|-----------------------|-----------------|------|--|
| BASIC FEE (\$710/355) | | | | | | | | |
| CLAIMS FEES | Number of Claims Remaining After Any Amendments Number Allowed in Base Fee | Number Allowed in | wed in Claims For | Equals Excess Claims For Which Fees Are Now Due | Times Rate (\$) | | | |
| | | Base Fee | | | Large Entity | Small Entity | | |
| Total Claims | 8 | 20 | | 0 | 18.00 | 9.00 | 0.00 | |
| Indep. Claims | 3 | 3 | | 0 | 80.00 | 40.00 | 0.00 | |
| EXTENSION PETITION/FEES (\$) Applicant hereby petitions for an extension of time for response under 37 CFR 1.136(a) as indicated or as necessary to maintain the pendency of this application. One month Two months Three months Four months 1,390.00 695.00 Five months 1,890.00 945.00 | | | | | | | | |
| ANY OTHER | FEES | | | | | | | |
| Assignment Recordation Fee | | | | | | | | |
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| TOTAL FEES OWED | | | | | | | | |

Deposit Account Authorization - The Commissioner is hereby authorized to charge any necessary payments or credit any applicable fees to Deposit Account No. 06-1620.

By:

A check for the \$395.00 filing fee is enclosed.

Date: 13 JWY 200]

L. Grant Foster

Registration No. 33,236